Case 24-10006-JCM Doc 18 Filed 02/20/24 Entered 02/20/24 14:55:58 Desc Main Document Page 1 of 47

Fill in this infor	mation to identify your	case:		
Debtor 1	Timothy A. Gurie			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	WESTERN DISTRICT	OF PENNSYLVANIA	
Case number	24-10006			
(if known)				☐ Check if this amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		Your a	assets of what you own
۱.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	81,258.75
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	469,164.02
	1c. Copy line 63, Total of all property on Schedule A/B	\$	550,422.77
aı	t 2: Summarize Your Liabilities		
			iabilities nt you owe
	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	116,745.00
	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	996.0
	Your total liabilities	\$	117,741.00
aı	t 3: Summarize Your Income and Expenses		
	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	7,400.98
	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	3,593.00
aı	t 4: Answer These Questions for Administrative and Statistical Records		
	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	r other sc	hedules.
	■ Yes What kind of debt do you have?		

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

the court with your other schedules.

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Debtor 1 Timothy A. Guriel Case number (if known) 24-10006

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$_____8,329.81

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

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			Document	Page 3 of 47				
Fill in this inforr	mation to identify	our case and th	is filing:					
Debtor 1	Timothy A. G		Name	LastNama				
Debtor 2	First Name	Middle	Name	Last Name				
(Spouse, if filing)	First Name	Middle	Name	Last Name				
United States Ba	ankruptcy Court for t	he: WESTERN	DISTRICT OF PE	NNSYLVANIA				
Case number	24-10006			_			☐ Check if this is an amended filing	
Schedul	orm 106A/B e A/B: Pr	<u> </u>	an asset only once	If an asset fits in more than one	category li	st the asset in	12/15	
. Do you own or h	Each Residence, Bu			Own or Have an Interest In				
	123 Church Street Street address, if available, or other description		What is the property? Check all that apply ■ Single-family home □ Duplex or multi-unit building □ Condominium or cooperative		the amoun	t of any secured	ored claims or exemptions. Put secured claims on Schedule D: e Claims Secured by Property.	
Greenville	PA State	16125-0000 ZIP Code		red or mobile home	Current va		Current value of the portion you own? \$81,258.75	
			☐ Timeshare ☐ Other Who has an intered ☐ Debtor 1 on	est in the property? Check one	(such as fo	ne nature of your ownership interes e simple, tenancy by the entireties e), if known.		
Mercer			Debtor 2 or	nly				
County	County			nd Debtor 2 only		k if this is com	munity property	
			Other information property identific	n you wish to add about this iten ation number:	m, such as lo	ocal		
			Residence Current Value	Based off of Tax Asses	ment (23,2	250 x 6.99)		
				s from Part 1, including any			\$81,258.75	

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Case 24-10006-JCM Doc 18 Filed 02/20/24 Entered 02/20/24 14:55:58 Desc Main Page 4 of 47 Document Case number (if known) 24-10006 Debtor 1 Timothy A. Guriel 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles ■ No ☐ Yes 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No ☐ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$0.00 pages you have attached for Part 2. Write that number here......=> Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware □ No Yes. Describe..... Various Household Goods and Furnishings \$3,630.00 Summary available Upon request 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games □ No Yes. Describe..... \$300.00 Electronics 8 Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ■ No ☐ Yes. Describe.....

Schedule A/B: Property

\$250.00

page 2

Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories

Clothes

11. Clothes

□ No

Yes. Describe.....

Official Form 106A/B

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Deb	otor 1	Timothy A. G	uriel		Case number (if known)	24-10006
12.	Jewelry					
_	No '		veiry, costume jeweiry, enga	agement rings, wedding rings, heirloc	om jeweiry, watches, gems, g	jold, silver
	☐ Yes.	Describe				
_		rm animals oles: Dogs, cats, b	oirds, horses			
	Yes.	Describe				
						**
			Pets: 1 Dog			\$0.00
ı	No	her personal and	·	d not already list, including any hea	alth aids you did not list	
15.				Part 3, including any entries for pa	nges you have attached	\$4,180.00
Pari	4: Des	scribe Your Financ	ial Assets			
			gal or equitable interest in	n any of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
ı	No .		ave in your wallet, in your h	nome, in a safe deposit box, and on h	and when you file your petiti	no
	-	0.	5 ·	counts; certificates of deposit; shares ts with the same institution, list each.		nouses, and other similar
				Institution name:		
			17.1. Checking	PNC Bank		\$4,916.02
			or publicly traded stocks investment accounts with br	rokerage firms, money market accou	ints	
	☐ Yes		Institution or issuer	r name:		
_	joint v	-	ock and interests in incorp	porated and unincorporated busing	esses, including an interes	t in an LLC, partnership, and
	■ No					
L	→ Yes.	Give specific info	rmation about them Name of entity:		% of ownership:	
_	Negoti	able instruments i	include personal checks, ca	potiable and non-negotiable instrur ashiers' checks, promissory notes, ar ransfer to someone by signing or deli	nd money orders.	
	□ Yes.	Give specific info	rmation about them Issuer name:			
	Retiren Examp ☐ No	nent or pension of the state of	accounts RA, ERISA, Keogh, 401(k),	403(b), thrift savings accounts, or otl	her pension or profit-sharing	plans

Official Form 106A/B Schedule A/B: Property page 3

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| Timothy A. Guriel | Case number (if known) | 24-10006 |

	Yes. List each acco		la stitution and a	
		Type of account: 401K	Institution name: Retirement	\$460,068.00
22		ised deposits you have made	e so that you may continue service or use from ent, public utilities (electric, gas, water), teleco Institution name or individual:	
23	■ No	t for a periodic payment of m	noney to you, either for life or for a number of	years)
24		ation IRA, in an account in), 529A(b), and 529(b)(1).	a qualified ABLE program, or under a qual option. Separately file the records of any interest.	
25	No	future interests in property	y (other than anything listed in line 1), and	rights or powers exercisable for your benefit
26	Examples: Internet of No		s, and other intellectual property ceeds from royalties and licensing agreemen	ts
27	Examples: Building p ■ No	s, and other general intang permits, exclusive licenses, c information about them	gibles cooperative association holdings, liquor licens	es, professional licenses
M	oney or property owe	d to you?		Current value of the portion you own? Do not deduct secured claims or exemptions.
28	. Tax refunds owed to ■ No □ Yes. Give specific		iding whether you already filed the returns and	d the tax years
29	. Family support Examples: Past due No Yes. Give specific i		al support, child support, maintenance, divord	ce settlement, property settlement
30		ages, disability insurance pa unpaid loans you made to so		pay, workers' compensation, Social Security
31	■ No	isability, or life insurance; he	alth savings account (HSA); credit, homeown	er's, or renter's insurance
	☐ Yes. Name the inst	urance company of each poli Company name:	cy and list its value. Beneficiar	y: Surrender or refund value:

Official Form 106A/B Schedule A/B: Property page 4

Doc 18 Filed 02/20/24 Entered 02/20/24 14:55:58 Case 24-10006-JCM Desc Main Document Page 7 of 47 Debtor 1 Case number (if known) 24-10006 Timothy A. Guriel 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.

☐ Yes. Give specific information	
 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue ■ No □ Yes. Describe each claim 	
34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to ■ No □ Yes. Describe each claim	o set off claims
35. Any financial assets you did not already list ■ No	
☐ Yes. Give specific information	
36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here	\$464,984.02
Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.	
37. Do you own or have any legal or equitable interest in any business-related property?	
No. Go to Part 6.	
Yes. Go to line 38.	
Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1.	
46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?	
■ No. Go to Part 7.	
☐ Yes. Go to line 47.	
Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above	
53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership	
■ No	
☐ Yes. Give specific information	

Official Form 106A/B Schedule A/B: Property page 5

\$0.00

54. Add the dollar value of all of your entries from Part 7. Write that number here

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Debtor 1 Case number (if known) 24-10006 Timothy A. Guriel Part 8: List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 \$81,258.75 Part 2: Total vehicles, line 5 56. \$0.00 Part 3: Total personal and household items, line 15 57. \$4,180.00 58. Part 4: Total financial assets, line 36 \$464,984.02 Part 5: Total business-related property, line 45 59. \$0.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 \$0.00 Total personal property. Add lines 56 through 61... 62. \$469,164.02 Copy personal property total \$469,164.02 63. Total of all property on Schedule A/B. Add line 55 + line 62 \$550,422.77

Official Form 106A/B Schedule A/B: Property page 6

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Fill in this info	rmation to identify your	case:		
Debtor 1	Timothy A. Gurie	I		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		WESTERN DISTRICT (DF PENNSYLVANIA	
Case number	24-10006			
(if known)				Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

Which set of examptions are you claiming? Check one only even if your engage in filing with your

4/22

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exem	pt
---	----

٠.	Which set of exemptions are you claiming: Greek one only, even if your spouse is filling with you.								
	☐ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)								
	■ You are claiming federal exemptions. 11	U.S.C. § 522(b)(2)							
2.	For any property you list on Schedule A/B that you claim as exempt, fill in the information below.								
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption				
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.					
	123 Church Street Greenville, PA	\$81,258.75		\$22,886.25	Specific laws that allow exemption 11 U.S.C. § 522(d)(1) 11 U.S.C. § 522(d)(3) 11 U.S.C. § 522(d)(3)				
	16125 Mercer County Residence Current Value Based off of Tax Assesment (23,250 x 6.99) Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit					
	Various Household Goods and	\$3,630.00		\$3,630.00	11 U.S.C. § 522(d)(3)				
	Furnishings Summary avaialble Upon request Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit					
	Electronics Line from Schedule A/B: 7.1	\$300.00		\$300.00	11 U.S.C. § 522(d)(3)				
	Line nom Schedule A/B. 7.1			100% of fair market value, up to any applicable statutory limit					
	Clothes	\$250.00		\$250.00	11 U.S.C. § 522(d)(3)				
	Line from Schedule A/B: 11.1			100% of fair market value, up to any applicable statutory limit					

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De	btor 1 Timothy A. Guriel		Case number (if known) 24-10006		
	Brief description of the property and line on Schedule A/B that lists this property			Specific laws that allow exemption	
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
	Pets: 1 Dog Line from Schedule A/B: 13.1	\$0.00		\$0.00	11 U.S.C. § 522(d)(3)
	Ellie Holli Golloddie 1722. 1611			100% of fair market value, up to any applicable statutory limit	
	Checking: PNC Bank Line from Schedule A/B: 17.1	\$4,916.02		\$4,916.02	11 U.S.C. § 522(d)(5)
	Line Ironi Scriedule Arb. 17.1			100% of fair market value, up to any applicable statutory limit	
	401K: Retirement Line from Schedule A/B: 21.1	\$460,068.00		\$460,068.00	11 U.S.C. § 522(d)(12)
	Line Ironi Scredule Arb. 21.1			100% of fair market value, up to any applicable statutory limit	
3.	Are you claiming a homestead exemption (Subject to adjustment on 4/01/25 and every ■ No □ Yes. Did you acquire the property cover □ No	3 years after that for ca	ises fi	,	,
	□ Yes				

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		Document	Page 11	of 47		
Fill in this inform	nation to identify you	ır case:				
Debtor 1	Timothy A. Guri	iel				
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Ba	nkruptcy Court for the:	WESTERN DISTRICT OF PE	NNSYLVANIA			
Case number	24-10006					
(if known)					☐ Check	if this is an
					amend	led filing
Official Farm	- 10CD					
Official Forn			_			
Schedule	D: Creditors	Who Have Claims	Secured	by Property	У	12/15
	e Additional Page, fill it o	If two married people are filing toget out, number the entries, and attach it				
l. Do any creditors	have claims secured by	y your property?				
☐ No. Check	this box and submit t	his form to the court with your othe	r schedules. Yo	ou have nothing else to	report on this form.	
Yes. Fill in	all of the information	below.				
Part 1: List A	II Secured Claims					
		more than one secured claim, list the cr	reditor separately	Column A	Column B	Column C
for each claim. If m	ore than one creditor has	s a particular claim, list the other credito cal order according to the creditor's nar	ors in Part 2. As	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.1 MRC/Unit	ed Wholesale	Describe the property that secures	the claim:	\$116,745.00	\$162,517.50	\$0.00
Attn: Ban P. O. Box Dallas, TX	kruptcy 619098	123 Church Street Greenvil 16125 Mercer County Residence Current Value Based off of Assesment (23,250 x 6.99) As of the date you file, the claim is apply. ☐ Contingent	Тах			
Number, Street	, City, State & Zip Code	☐ Unliquidated				
	1.00	☐ Disputed				
Who owes the de	ebt? Check one.	Nature of lien. Check all that apply.				
Debtor 1 only			mortgage or sec	eurea		
Debtor 2 only		, -				
Debtor 1 and De	he debtors and another	☐ Statutory lien (such as tax lien, med Judgment lien from a lawsuit	ecnanic's lien)			
Check if this cl	aim relates to a	Other (including a right to offset)	Mortgage			
Date debt was inc	urred 6/2006	Last 4 digits of account nun	nber 9442			
		=				
	•	column A on this page. Write that num		\$116,74	5.00	
Write that number		the dollar value totals from all pages).	\$116,74	5.00	
Part 2: List Oth	ners to Be Notified fo	or a Debt That You Already Listed	d			
trying to collect fro than one creditor	om you for a debt you o	e notified about your bankruptcy for twe to someone else, list the creditor t you listed in Part 1, list the addition his page.	r in Part 1, and th	nen list the collection ag	ency here. Similarly, if	ou have more
	mber, Street, City, State &	& Zip Code	On whic	ch line in Part 1 did you er	nter the creditor? 2.1	

Nationstar Mortgage,LLC 8950 Cypress Waters Blvd. Coppell, TX 75019

Last 4 digits of account number ____

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		Document	Page 1	2 01 47	
Fill in this in	formation to identify your	case:			
Debtor 1	Timothy A. Guriel				
Dobtor 1	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States	Bankruptcy Court for the:	WESTERN DISTRICT OF	PENNSYLVANIA	4	
0					
Case number (if known)	24-10006				☐ Check if this is an
()					amended filing
					3
Official Fo	orm 106E/F				
3chedule	E/F: Creditors W	ho Have Unsecur	ed Claims		12/15
Schedule G: Ex Schedule D: Cr eft. Attach the name and case	ecutory Contracts and Unexpeditors Who Have Claims Sec Continuation Page to this pag number (if known).	ired Leases (Official Form 106 ured by Property. If more spac e. If you have no information t	G). Do not include e is needed, copy	any creditors with partially s the Part you need, fill it out, r	Property (Official Form 106A/B) and on ecured claims that are listed in number the entries in the boxes on the op of any additional pages, write your
	at All of Your PRIORITY Un				
	editors have priority unsecure	d claims against you?			
■ No. Go	to Part 2.				
☐ Yes.					
Part 2: Lis	t All of Your NONPRIORIT	Y Unsecured Claims			
	editors have nonpriority unsec				
_ `		art. Submit this form to the court	with your other ach	odulos	
_	rnave nothing to report in this p	art. Submit this form to the court	with your other sch	edules.	
Yes.					
unsecured	claim, list the creditor separately	for each claim. For each claim	isted, identify what	type of claim it is. Do not list cla	or has more than one nonpriority aims already included in Part 1. If more aims fill out the Continuation Page of
					Total claim
4.1 Coas	st to Coast Financial So	lutions Last 4 digits of	account number	0647	\$143.00
	iority Creditor's Name				
	: Bankruptcy Hodencamp Rd Ste 120	When was the	debt incurred?	4/2021	
	usand Oaks, CA 91360				
	er Street City State Zip Code	As of the date	you file, the claim	is: Check all that apply	
Who i	ncurred the debt? Check one.				
■ De	btor 1 only	☐ Contingent			
☐ De	btor 2 only	☐ Unliquidated	I		
☐ De	btor 1 and Debtor 2 only	☐ Disputed			
☐ At	least one of the debtors and and	other Type of NONP	RIORITY unsecure	d claim:	
☐ Ch	eck if this claim is for a com	munity	ns		
debt Is the	claim subject to offset?	☐ Obligations report as priority		aration agreement or divorce th	at you did not
■ No		☐ Debts to per	nsion or profit-sharir	ng plans, and other similar debt	s
☐ Ye	S	Other Spec	ify Collections	s for Tri-County Industr	ries Inc
		— Other oper	,		

Case 24-10006-JCM	Doc 18	Filed 02/20/2	24 Entered 02/20/24 :	14:55:58	Desc Main
		Document I	Page 13 of 47		
Debtor 1 Timothy A. Guriel			Case number (if known)	24-10006	

4.2	Credit One Bank	Last 4 digits of account number	2227	\$62.00
	Nonpriority Creditor's Name Attn: Bankruptcy Department 6801 Cimarron Rd	When was the debt incurred?	2/2023	
	Las Vegas, NV 89113 Number Street City State Zip Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	■ Other. Specify groceries,	purchases for clothing, and personal expenses	
4.3	Credit One Bank Nonpriority Creditor's Name	Last 4 digits of account number	6525	\$52.00
	Attn: Bankruptcy Department 6801 Cimarron Rd	When was the debt incurred?	1/2022	
	Las Vegas, NV 89113 Number Street City State Zip Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.	•	,	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt	Student loans		
	Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other. Specify Credit card	purchases for personal items	
4.4	Envision Physician Services	Last 4 digits of account number	2210	\$739.00
	Nonpriority Creditor's Name PO Box 37996	When was the debt incurred?	1/2020	
	Philadelphia, PA 19101-7996	_		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community debt	Student loans	rotion correspond on diverse the transmitted	
	Is the claim subject to offset?	Obligations arising out of a separe report as priority claims	ration agreement or divorce that you did not	
	No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	□Yes	Other. Specify Medical De	bt	
		,	_	

Part 3: List Others to Be Notified About a Debt That You Already Listed

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

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Debtor 1 Timothy A. Guriel		Case number (if known)	24-10006				
Name and Address PA Liberty St Emergency	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.4 of (Check one):						
Physicians LLC 781 Liberty Street Meadville, PA 16335	■ Part 2: Creditors with Nonpriority Unsecured Claims						
	Last 4 digits of account number						
Name and Address	On which entry in Part 1 or Part 2 di	d you list the original creditor?					
Tri-County Industries Inc.	Line 4.1 of (<i>Check one</i>):	☐ Part 1: Creditors with Prior	ity Unsecured Claims				
159 Tci Park Drive Grove City, PA 16127		■ Part 2: Creditors with Nonpriority Unsecured Claims					
	Last 4 digits of account number						

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				1	otal Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims					
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
				7	otal Claim
Total	6f.	Student loans	6f.	\$	0.00
claims					
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	996.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	996.00

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Fill in this infor	mation to identify your	case:		
Debtor 1	Timothy A. Gurie	I		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	WESTERN DISTRICT O	OF PENNSYLVANIA	
Case number	24-10006			
(if known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with	whom you have the	e contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.2					
	Name				
	Number	Street			
	City		State	ZIP Code	<u> </u>
2.3	City		State	ZIF Code	
2.0	Name				<u> </u>
	Number	Street			
	City		State	ZIP Code	_
2.4					
	Name				<u> </u>
	Number	Street			<u> </u>
	City		State	ZIP Code	_
2.5	July		Oldio	211 0000	
-	Name				
	Number	Street			_
	City		State	ZIP Code	_
	July		Olalo	<u> </u>	

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		Docume	nt Page 16 C	1147	
Fill in this i	information to identify your	case:			
Debtor 1	Timothy A. Gurie				
DCDIOI 1	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing	g) First Name	Middle Name	Last Name		
United State	es Bankruptcy Court for the:	WESTERN DISTRICT (OF PENNSYLVANIA		
Case numb	er 24-10006				
(if known)	24-10000				☐ Check if this is an
					amended filing
o	- 40011				
	Form 106H				
Schedi	ule H: Your Cod	ebtors			12/15
our name a	nd number the entries in the and case number (if known) you have any codebtors? (If	. Answer every question		. •	p of any Additional Pages, write
·		, <u> </u>	•		
■ No □ Yes					
Arizona ■ No. (□ Yes. 3. In Coluin line 2 Form 1	a, California, Idaho, Louisiana, Go to line 3. Did your spouse, former spoumn 1, list all of your codebt 2 again as a codebtor only i 06D), Schedule E/F (Official	Nevada, New Mexico, Pu use, or legal equivalent live ors. Do not include your f that person is a guaran	e with you at the time? spouse as a codebtor tor or cosigner. Make	ington, and Wisconsin. if your spouse is filir sure you have listed t	ty states and territories include) ng with you. List the person shown the creditor on Schedule D (Official Schedule G to fill
	lumn 2.				
_	Column 1: Your codebtor ame, Number, Street, City, State and ZI	P Code		Column 2: The cr Check all schedul	editor to whom you owe the debt es that apply:
				_	
3.1	lame			_ Gchedule D, lir	
IN	ame			☐ Schedule E/F,	
				☐ Schedule G, lii	ne
	lumber Street			_	
С	City	State	ZIP Code		
				Пол	
3.2	lame			Schedule D, lir	
14	·····			☐ Schedule E/F,	
				☐ Schedule G, lii	ne
	lumber Street	Chata	710.0-4-		
С	City	State	ZIP Code		

Official Form 106H Schedule H: Your Codebtors Page 1 of 1

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							ı				
Fill	in this information to	o identify your ca	ase:								
Del	otor 1	Timothy A. 0	Guriel								
	otor 2 ouse, if filing)					_					
Uni	ted States Bankrupt	cy Court for the	: WESTERN DISTRICT	Γ OF PENNSYLVANIA	4						
Cas	se number 24-	10006					Chec	k if this is:	:		
(If kr	nown)			-			ΠА	n amende	ed filing		
										g postpetition ollowing date:	
0	fficial Form	<u> 1061</u>					\overline{M}	IM / DD/ Y	YYYY		
S	chedule I: \	Your Inc	ome								12/15
	<u> </u>	Employment	On the top of any additi	onal pages, write yo	ur name	e and	I case nu	·	·	ling spouse	question
								☐ Empl		ing spouse	
	If you have more t attach a separate information about	page with	Employment status	■ Employed□ Not employed				□ Not e	•		
	employers.		Occupation	Steel Worker							
	Include part-time, self-employed wor		Employer's name	Wheatland Tube	LLC						
	Occupation may ir or homemaker, if it		Employer's address	PO Box 608 Wheatland, PA 1	16161						
			How long employed t	here? 26 Year	s			_			
Par	t 2: Give Det	ails About Mor	nthly Income								
Esti spou	mate monthly inco use unless you are s	me as of the deseparated.	ate you file this form. If	you have nothing to re	port for	any	ine, write	\$0 in the	space. Inc	clude your no	n-filing
	ou or your non-filing s e space, attach a se		ore than one employer, co	ombine the information	n for all e	empl	oyers for	that perso	on on the li	nes below. If	you need
							For Dek	otor 1		btor 2 or ng spouse	
2.			ry, and commissions (b calculate what the monthl		2.	\$	10	,154.19	\$	N/A	
3.	Estimate and list	monthly overt	ime pay.		3.	+\$		0.00	+\$	N/A	I
4.	Calculate gross I	ncome. Add lir	ne 2 + line 3.		4.	\$	10.15	54.19	\$	N/A	

Debt	tor 1	Timothy A. Guriel		C	Case number (if kn	own)	24-10)006		
					For Debtor 1		For	Debtor 2	or	
								filing sp		
	Сор	y line 4 here	4.		\$ 10,154	.19	\$		N/A	-
_	1 !=4									
5.		all payroll deductions:								
	5a.	Tax, Medicare, and Social Security deductions	5a		\$ 2,449		\$		N/A	_
	5b.	Mandatory contributions for retirement plans	5b			.00	\$		N/A	_
	5c. 5d.	Voluntary contributions for retirement plans Required repayments of retirement fund loans	5c.			.00	\$		N/A	_
	5u. 5e.	Insurance	5d 5e		\$ <u>0</u>	.00	\$		N/A N/A	_
	5e. 5f.	Domestic support obligations	5e 5f.		. — — — — — — — — — — — — — — — — — — —	.00	\$ 		N/A	_
	5g.	Union dues	5g		·	.96	\$		N/A	_
	5h.	Other deductions. Specify:	5h			.00	· · —		N/A	_
_			_		· ———					-
6. -		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$ <u>2,753</u>		\$		N/A	-
7.	Caid	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$7,400	.98	\$		N/A	-
8.		all other income regularly received:								
	8a.	Net income from rental property and from operating a business, profession, or farm								
		Attach a statement for each property and business showing gross								
		receipts, ordinary and necessary business expenses, and the total								
		monthly net income.	8a			.00	\$		N/A	
	8b.	Interest and dividends	8b).	\$0	.00	\$		N/A	_
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive								
		Include alimony, spousal support, child support, maintenance, divorce								
		settlement, and property settlement.	8c	:.	\$ 0	.00	\$		N/A	
	8d.	Unemployment compensation	8d	l.		.00	\$		N/A	
	8e.	Social Security	8e).	\$ 0	.00	\$		N/A	-
	8f.	Other government assistance that you regularly receive								-
		Include cash assistance and the value (if known) of any non-cash assistance								
		that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.								
		Specify:	8f.		\$ 0	.00	\$		N/A	
	8g.	Pension or retirement income	_ 8g	١.		.00	\$		N/A	
	8h.	Other monthly income. Specify:	8h	1.+	\$ 0	.00	+ \$		N/A	-
										_
9.	Add	l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	50	.00	\$		N/A	A
			г			$\overline{}$				
10.	Calc	culate monthly income. Add line 7 + line 9.	10.	\$	7,400.98	+ \$		N/A =	= \$	7,400.98
	Add	the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.								
11.	Stat	e all other regular contributions to the expenses that you list in Schedule	J.							
	Inclu	ude contributions from an unmarried partner, members of your household, your	depe	ende	ents, your roomi	mates	s, and			
		er friends or relatives.	:	_ _ _		1: . 4	: L- C		,	
	Spe	not include any amounts already included in lines 2-10 or amounts that are not ϵ	avalla	abie	to pay expense	es iisi	ea in S	11.		0.00
	Opc								-Ψ	0.00
12.	Add	the amount in the last column of line 10 to the amount in line 11. The res	ult is	the	combined mon	thlv ir	ncome.			
		e that amount on the Summary of Schedules and Statistical Summary of Certai						40	•	7 400 00
	appl	ies						12.	\$	7,400.98
								_	Combi	ned
	_		_					ı	monthl	y income
13.	Do y	you expect an increase or decrease within the year after you file this form	?							
		No.								
	1 1	Yes. Explain:								

Fill in th	nis informati	on to identify yo	our case:			I		
Debtor 1		Timothy A. C				Chec	k if this is:	
	-	Tilliotily A. C	Juliei				An amended filing	
Debtor 2 (Spouse	_							wing postpetition chapter the following date:
United S	tates Bankru	ptcy Court for the	: WESTE	ERN DISTRICT OF PENNS	SYLVANIA	ī	MM / DD / YYYY	
Case nu		10006						
		m 106J						
		J: Your			a filiaa ta wathaa b	-4l		12/15
informa	ation. If mo		eded, atta	. If two married people ar ich another sheet to this in.				
Part 1:		oe Your House	hold					
_	this a joint							
			in a separ	ate household?				
	□ No □ Yes		st file Offici	al Form 106J-2, <i>Expenses</i>	for Separate House	ehold of Debte	or 2.	
2. D c	you have	dependents?	■ No					
	not list Del ebtor 2.	btor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	not state th							□ No
ue	pendents n	ames.						☐ Yes ☐ No
								Yes
								□ No □ Yes
								□ No
0 D .			_					☐ Yes
ex	penses of	enses include people other t	han $_{oldsymbol{\sqcap}}$	No Van				
yo	urself and	your depende	nts? ⊔	Yes				
Part 2:		te Your Ongoi		y Expenses uptcy filing date unless y	ou are using this f	orm as a sur	onlament in a Cha	enter 13 case to report
expens				y is filed. If this is a supp				
Include the valu	e expenses ue of such	paid for with assistance an	non-cash d have ind	government assistance in cluded it on Schedule I: Y	f you know <i>'our Incom</i> e		,,	
(Officia	ıl Form 106	l.)					Your exp	enses
		home owners I any rent for the		ses for your residence. In or lot.	nclude first mortgag	e 4. \$		0.00
lf ı	not include	d in line 4:						
4a		tate taxes				4a. \$		0.00
4b 4c		y, homeowner's		's insurance ıpkeep expenses		4b. \$ 4c. \$		0.00
40 4d			•	dominium dues		4d. \$		150.00 0.00
5. Ac	dditional m	ortgage payme	ents for yo	our residence, such as ho	me equity loans	5. \$		0.00

Debtor 1 Timothy A. Guriel	Case number (if	(known) 24-10006
6. Utilities:		
6a. Electricity, heat, natural gas	6a. \$	450.00
6b. Water, sewer, garbage collection	6b. \$	120.00
6c. Telephone, cell phone, Internet, satellite, and cable ser	vices 6c. \$	380.00
6d. Other. Specify:	6d. \$	0.00
7. Food and housekeeping supplies	7. \$	710.00
Childcare and children's education costs	8. \$	0.00
Clothing, laundry, and dry cleaning	9. \$	180.00
Personal care products and services	10. \$	243.00
Medical and dental expenses	11. \$	200.00
	Π. Φ _	200.00
Transportation. Include gas, maintenance, bus or train fare.Do not include car payments.	12. \$	550.00
3. Entertainment, clubs, recreation, newspapers, magazines	<u> </u>	300.00
4. Charitable contributions and religious donations	14. \$	0.00
5. Insurance.	ι4. Φ _	0.00
 Do not include insurance deducted from your pay or included 	in lines 4 or 20	
15a. Life insurance	15a. \$	0.00
15b. Health insurance	15b. \$	0.00
15c. Vehicle insurance	· -	
	· _	260.00
15d. Other insurance. Specify:	15d. \$	0.00
 Taxes. Do not include taxes deducted from your pay or include taxes. 		2.22
Specify:	16. \$ _	0.00
7. Installment or lease payments:	47- A	0.00
17a. Car payments for Vehicle 1	17a. \$ _	0.00
17b. Car payments for Vehicle 2	17b. \$	0.00
17c. Other. Specify:	17c. \$ _	0.00
17d. Other. Specify:	17d. \$ _	0.00
Your payments of alimony, maintenance, and support that		0.00
deducted from your pay on line 5, Schedule I, Your Incon		0.00
Other payments you make to support others who do not	_	0.00
Specify:	19.	
O. Other real property expenses not included in lines 4 or 5		
20a. Mortgages on other property	20a. \$ _	0.00
20b. Real estate taxes	20b. \$ _	0.00
20c. Property, homeowner's, or renter's insurance	20c. \$	0.00
20d. Maintenance, repair, and upkeep expenses	20d. \$	0.00
20e. Homeowner's association or condominium dues	20e. \$	0.00
I. Other: Specify: Pet Expenses	21. +\$	50.00
· · · · · · · · · · · · · · · · · · ·		20.00
2. Calculate your monthly expenses		
22a. Add lines 4 through 21.	\$	3,593.00
22b. Copy line 22 (monthly expenses for Debtor 2), if any, fro	m Official Form 106J-2 \$	
22c. Add line 22a and 22b. The result is your monthly expens	ses. \$	3,593.00
3. Calculate your monthly net income.		
23a. Copy line 12 (your combined monthly income) from Scl		7,400.98
23b. Copy your monthly expenses from line 22c above.	23b\$ _	3,593.00
		·
23c. Subtract your monthly expenses from your monthly inc	ome.	2 207 00
The result is your monthly net income.	23c. \$	3,807.98
		_
4. Do you expect an increase or decrease in your expenses		
For example, do you expect to finish paying for your car loan within the modification to the terms of your mortgage?	year or do you expect your mortgage payme	ent to increase or decrease because o
. 55		
■ No.		
☐ Yes. Explain here:		

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Fill in this inform	ation to identify your	case:			
Debtor 1	Timothy A. Gurie	1			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ban	kruptcy Court for the:	WESTERN DISTRICT C	F PENNSYLVANIA		
Case number 2	4-10006				
(if known)					☐ Check if this is an
					amended filing
0(() : 1 =	400D				
Official Form			_		
Declarati	on About a	ın Individual	Debtor's So	chedules	12/15
If two married peo	ople are filing togethe	r, both are equally respor	nsible for supplying co	rrect information.	
obtaining money		n connection with a bank			ement, concealing property, or 10, or imprisonment for up to 20
Sign	Below				
Did you pay	or agree to pay some	one who is NOT an attori	ney to help you fill out	bankruptcy forms?	
■ No					
☐ Yes. Na	ame of person			Attach Bani	kruptcy Petition Preparer's Notice,
					, and Signature (Official Form 119)
	y of perjury, I declare true and correct.	that I have read the sumn	mary and schedules fil	ed with this declaration	on and
X /s/ Timo	othy A. Guriel		X		
	A. Guriel		Signature c	of Debtor 2	
	e of Debtor 1		Ÿ		

Date February 20, 2024

Date

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Fill in	this inform	nation to identify you	r case:			
Debtor		Timothy A. Gurie				
5.1.		First Name	Middle Name	Last Name		
Debtor (Spouse		First Name	Middle Name	Last Name		
United	States Bar	kruptcy Court for the:	WESTERN DISTRICT OF	F PENNSYLVANIA		
Case r	number 2	4-10006				
(if known	· · · · <u>-</u>	+-10000			_	Check if this is an amended filing
		m 107 of Financial	Affairs for Individ	duals Filing for B	ankruptcy	04/2
nforma numbe	ation. If me r (if known	ore space is needed,). Answer every ques	attach a separate sheet to stion.	this form. On the top of an	equally responsible for sup y additional pages, write you	
Part 1:			rital Status and Where You	Lived Before		
i. W	hat is your	current marital statu	s?			
■	Married Not mar	ried				
2. Du	uring the la	st 3 years, have you	lived anywhere other than	where you live now?		
	No Yes. List	all of the places you li	ived in the last 3 years. Do no	ot include where you live now	<i>ı</i> .	
D	ebtor 1:		Dates Debtor 1 lived there	Debtor 2 Prior Ac	dress:	Dates Debtor 2 lived there
					ity property state or territory ico, Texas, Washington and W	
	No Yes. Ma	ke sure you fill out <i>Sch</i>	nedule H: Your Codebtors (O	fficial Form 106H).		
Part 2	Explain	n the Sources of You	r Income			
Fil	I in the tota	I amount of income yo	u received from all jobs and a	ng a business during this yeall businesses, including part e together, list it only once ur		ndar years?
□		in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$0.00	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

Case 24-10006-JCM Doc 18 Filed 02/20/24 Entered 02/20/24 14:55:58 Desc Main Page 23 of 47 Document Case number (if known) 24-10006 Debtor 1 Timothy A. Guriel Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** (before deductions Check all that apply. (before deductions and Check all that apply. exclusions) and exclusions) For last calendar year: \$98,266.55 □ Wages, commissions, Wages, commissions, (January 1 to December 31, 2023) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business For the calendar year before that: \$89,085.00 ☐ Wages, commissions, Wages, commissions. (January 1 to December 31, 2022) bonuses, tips bonuses, tips Operating a business ☐ Operating a business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. No Yes. Fill in the details. Debtor 1 Debtor 2 **Gross income from** Sources of income **Gross income** Sources of income Describe below. each source Describe below. (before deductions (before deductions and and exclusions) exclusions) Part 3: List Certain Payments You Made Before You Filed for Bankruptcy Are either Debtor 1's or Debtor 2's debts primarily consumer debts? Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$7,575* or more? □ No. Go to line 7. □ Yes List below each creditor to whom you paid a total of \$7,575* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/25 and every 3 years after that for cases filed on or after the date of adjustment. Debtor 1 or Debtor 2 or both have primarily consumer debts.

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

No. Go to line 7. □ Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not

include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an

attorney for this bankruptcy case.

Creditor's Name and Address Amount you Was this payment for ... Dates of payment **Total amount** still owe paid

Filed 02/20/24 Entered 02/20/24 14:55:58 Case 24-10006-JCM Doc 18 Desc Main Page 24 of 47 Document Timothy A. Guriel Case number (if known) 24-10006 Debtor 1 Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. No ☐ Yes. List all payments to an insider. **Insider's Name and Address Dates of payment Total amount** Amount you Reason for this payment still owe paid Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an 8. insider? Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments to an insider **Insider's Name and Address** Dates of payment **Total amount** Amount you Reason for this payment paid still owe Include creditor's name Part 4: Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. Nο ☐ Yes. Fill in the details. Case title Nature of the case Court or agency Status of the case Case number 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. **Creditor Name and Address Describe the Property** Date Value of the property **Explain what happened** 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? No Yes. Fill in the details. **Creditor Name and Address** Describe the action the creditor took Date action was Amount 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No ☐ Yes Part 5: List Certain Gifts and Contributions

Yes. Fill in the details for each gift.
Gifts with a total value of more than \$600

13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?

Describe the gifts

Value

Dates you gave

the gifts

per person

Case 24-10006-JCM Doc 18 Filed 02/20/24 Entered 02/20/24 14:55:58 Desc Main Page 25 of 47 Document Case number (if known) 24-10006 Debtor 1 Timothy A. Guriel 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? Nο Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value more than \$600 contributed **Charity's Name** Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses 15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? No Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. Yes. Fill in the details. Description and value of any property Person Who Was Paid Amount of Date payment Address transferred or transfer was payment Email or website address made Person Who Made the Payment, if Not You **Foster Law Offices** Expenses: \$500.00 \$25,000.00 1210 Park Avenue Legal Fee Retainer: \$2,000.00 Meadville, PA 16335 dan@mrdebtbuster.com

17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?

Do not include any payment or transfer that you listed on line 16.

No

Yes. Fill in the details.

Person Who Was Paid

Address

Description and value of any property
transferred

Date payment
or transfer was
payment
made

18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?

Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.

No

Yes. Fill in the details.

Person Who Received Transfer Address

Person's relationship to you

Description and value of property transferred

Describe any property or payments received or debts paid in exchange Date transfer was made

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Debtor 1 Timothy A. Guriel Case number (if known) 24-10006

19.	Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) No Yes. Fill in the details.								
	Name of trust	Description and v	alue of the pr	operty trans	sferred	Date Transfer was made			
Par	t 8: List of Certain Financial Accounts, Instr	ruments, Safe Deposit	Boxes, and S	Storage Unit	ts				
20.	Within 1 year before you filed for bankruptcy, sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, association No Yes. Fill in the details.	other financial accour	nts; certificate	es of deposi	•				
		Last 4 digits of account number	Type of accinstrument	ount or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer			
21.	Do you now have, or did you have within 1 ye cash, or other valuables?	ar before you filed for	bankruptcy,	any safe de _l	posit box or other depos	itory for securities,			
	■ No □ Yes. Fill in the details.								
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)		Address (Number, Street, City,		the contents	Do you still have it?			
22.	Have you stored property in a storage unit or	place other than your	home within	1 year before	re you filed for bankrupt	cy?			
	No The state of th								
	Yes. Fill in the details.	140				5 (111			
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)			the contents	Do you still have it?			
Par	t 9: Identify Property You Hold or Control fo	or Someone Else							
23.	Do you hold or control any property that some for someone.	eone else owns? Inclu	ıde any prope	erty you bor	rowed from, are storing	for, or hold in trust			
	■ No □ Yes. Fill in the details.								
	Owner's Name Address (Number, Street, City, State and ZIP Code)		(Number, Street, City, State and ZIP		the property	Value			
Par	t 10: Give Details About Environmental Inform	mation							
For	the purpose of Part 10, the following definition	ns apply:							
	Environmental law means any federal, state, of toxic substances, wastes, or material into the regulations controlling the cleanup of these s	air, land, soil, surface	water, grour	• .	•				
	Site means any location, facility, or property a to own, operate, or utilize it, including dispose	•	environmenta	l law, wheth	er you now own, operat	e, or utilize it or used			
	Hazardous material means anything an environment hazardous material, pollutant, contaminant, o		as a hazardou	ıs waste, ha	zardous substance, toxi	c substance,			

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

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Debtor 1 Timothy A. Guriel

Case number (if known) 24-10006

24.	Has any governmental unit notified you that you ■ No	a may be liable or potentially liab	le un	der or in violation of an environme	ntal law?					
	Yes. Fill in the details.									
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State a ZIP Code)	and	Environmental law, if you know it	Date of notice					
25.	Have you notified any governmental unit of any	release of hazardous material?								
	■ No □ Yes. Fill in the details.									
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State a ZIP Code)	and	Environmental law, if you know it	Date of notice					
26.	Have you been a party in any judicial or adminis —	strative proceeding under any en	viron	mental law? Include settlements a	nd orders.					
	■ No □ Yes. Fill in the details.									
	Case Title Court or agency Name Address (Number, Street, City, State and ZIP Code) Nature of the case									
Par	11: Give Details About Your Business or Con	nections to Any Business								
27.	Within 4 years before you filed for bankruptcy, c	did you own a business or have a	any o	f the following connections to any	business?					
	☐ A sole proprietor or self-employed in a t	rade, profession, or other activity	y, eith	her full-time or part-time						
	☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)									
	☐ A partner in a partnership	☐ A partner in a partnership								
	☐ An officer, director, or managing execut	tive of a corporation								
	☐ An owner of at least 5% of the voting or	equity securities of a corporatio	n							
	■ No. None of the above applies. Go to Part	12.								
	☐ Yes. Check all that apply above and fill in the	he details below for each busine	SS.							
		scribe the nature of the business	S	Employer Identification number						
	Address (Number, Street, City, State and ZIP Code)	me of accountant or bookkeeper		Do not include Social Security n Dates business existed	lumber or IIIN.					
28.	Within 2 years before you filed for bankruptcy, on the parties.	did you give a financial statemen	t to a	nyone about your business? Inclu	de all financial					
	■ No □ Yes. Fill in the details below.									
	Name Address (Number, Street, City, State and ZIP Code)	te Issued								

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Case number (if known) 24-10006 Debtor 1 Timothy A. Guriel Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Timothy A. Guriel Signature of Debtor 2 Timothy A. Guriel Signature of Debtor 1 Date February 20, 2024 **Date** Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms? ■ No

☐ Yes. Name of Person _____. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Fill in this information to identify your case:									
Debtor 1	Timothy A. Guriel								
Debtor 2 (Spouse, if filing)									
United States E	Bankruptcy Court for the: Western District of Pennsylvania								
Case number (if known)	24-10006								

Check	Check as directed in lines 17 and 21:								
According to the calculations required by this Statement:									
	1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).								
•	2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).								
	3. The commitment period is 3 years.								
	4. The commitment period is 5 years.								

☐ Check if this is an amended filing

Official Form 122C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

10/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part 1: Calculate Your Average Monthly Income 1. What is your marital and filing status? Check one only. □ Not married. Fill out Column A, lines 2-11. ■ Married. Fill out both Columns A and B. lines 2-11. Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space. Column A Column B Debtor 1 Debtor 2 or non-filing spouse 2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all 8,329.81 0.00 payroll deductions). Alimony and maintenance payments. Do not include payments from a spouse if 0.00 0.00 Column B is filled in. 4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Do not include payments from a spouse. Do not include payments 0.00 0.00 you listed on line 3. 5. Net income from operating a business, Debtor 1 profession, or farm \$ 0.00 Gross receipts (before all deductions) 0.00 Ordinary and necessary operating expenses 0.00 0.00 0.00 Copy here -> \$ Net monthly income from a business, profession, or farm \$ 6. Net income from rental and other real property Debtor 1 0.00 \$ Gross receipts (before all deductions) -\$ 0.00 Ordinary and necessary operating expenses 0.00 Copy here -> \$ 0.00 0.00 \$ Net monthly income from rental or other real property

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Case number (if known)

Column A Column B Debtor 1 Debtor 2 or non-filing spouse 0.00 0.00 7. Interest, dividends, and royalties 8. Unemployment compensation 0.00 0.00 Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: For you_____ 0.00 For your spouse 0.00 9. Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act. Also, except as stated in the next sentence, do not include any compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If you received any retired pay paid under chapter 61 of title 10, then include that pay only to the extent that it does not exceed the amount of retired pay to which you would otherwise be entitled 0.00 0.00 if retired under any provision of title 10 other than chapter 61 of that title. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act; payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism; or compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If necessary, list other sources on a separate page and put the total below. 0.00 0.00 0.00 Total amounts from separate pages, if any. 0.00 0.00 11. Calculate your total average monthly income. Add lines 2 through 10 for 8,329.81 0.00 8.329.81 \$ each column. Then add the total for Column A to the total for Column B. Total average monthly income Part 2: **Determine How to Measure Your Deductions from Income** 12. Copy your total average monthly income from line 11. 8.329.81 13. Calculate the marital adjustment. Check one: ☐ You are not married. Fill in 0 below. You are married and your spouse is filing with you. Fill in 0 below. You are married and your spouse is not filing with you. Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents. Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If this adjustment does not apply, enter 0 below. 0.00 0.00 Copy here=> 8,329.81 14. Your current monthly income. Subtract line 13 from line 12. 15. Calculate your current monthly income for the year. Follow these steps: 8,329.81 15a. Copy line 14 here=>

Timothy A. Guriel

Debtor 1

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Debto	r 1	Tim	othy A. Guriel		Case number (if known)	24-10006		
		М	ultiply line 15a by 12 (the number of months in	a year).			Х	12
	15	b. Th	ne result is your current monthly income for the	year for this part of the	e form		\$	99,957.72
16.	Cal	culate	the median family income that applies to y	ou. Follow these steps	y:			
	16a	. Fill ir	n the state in which you live.	PA				
	16b	. Fill ir	n the number of people in your household.	2				
	16c	To fi	n the median family income for your state and so and a list of applicable median income amounts auctions for this form. This list may also be avai	s, go online using the lir			\$	78,349.00
17.	Hov	v do t	he lines compare?					
	17a	. 🗆	Line 15b is less than or equal to line 16c. C 11 U.S.C. § 1325(b)(3). Go to Part 3. Do N					
	17b	. •	Line 15b is more than line 16c. On the top of 1325(b)(3). Go to Part 3 and fill out Calcu your current monthly income from line 14 al	lation of Your Dispos				
Part	3:	Ca	Iculate Your Commitment Period Under 11	U.S.C. § 1325(b)(4)				
18.	Cop	у уог	ır total average monthly income from line 1	1.		\$_		8,329.81
	Dec	luct th	ne marital adjustment if it applies. If you are not calculating the commitment period under 1 income, copy the amount from line 13.	married, your spouse i	s not filing with you, and you			
	19a	. If the	e marital adjustment does not apply, fill in 0 on	line 19a.		- \$_		0.00
	19b	. Subt	tract line 19a from line 18.				\$	8,329.81
20.	Cal	culate	your current monthly income for the year.	Follow these steps:				
	20a	. Copy	/ line 19b				\$	8,329.81
		Multi	ply by 12 (the number of months in a year).				X	12
	20b	. The	result is your current monthly income for the ye	ear for this part of the fo	orm		\$	99,957.72
	20c	. Copy	the median family income for your state and	size of household from	line 16c		\$	78,349.00
	21.	How	do the lines compare?					
			Line 20b is less than line 20c. Unless otherwis period is 3 years. Go to Part 4.	se ordered by the court	, on the top of page 1 of this f	orm, check bo	x 3, <i>TI</i>	ne commitment
			Line 20b is more than or equal to line 20c. Un commitment period is 5 years. Go to Part 4.	less otherwise ordered	by the court, on the top of pa	ge 1 of this for	m, che	eck box 4, The
Part			gn Below g here, under penalty of perjury I declare that tl	he information on this s	statement and in any attachme	ents is true an	d corre	act
v	•			ne information on this c	statement and in any attaching	into io truc ario	a conc	ot.
X			othy A. Guriel y A. Guriel					
			e of Debtor 1					
	Date		bruary 20, 2024					
	If yo		cked 17a, do NOT fill out or file Form 122C-2.					
	•		cked 17h, fill out Form 122C-2 and file it with t	his form. On line 30 of	that form convivour current m	onthly income	from	line 14 above

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Debtor 1 Timothy A. Guriel Case number (if known) 24-10006

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Fill in this information to identify your case:	
Debtor 1 Timothy A. Guriel	
Debtor 2 (Spouse, if filing)	-
United States Bankruptcy Court for the: Western District of Pennsylvania	_
Case number 24-10006 (if known)	☐ Check if this is an amended filing
Official Form 122C-2 Chapter 13 Calculation of Your Disposable	Income 04/2
To fill out this form, you will need your completed copy of <i>Chapter 13 State Commitment Period</i> (Official Form 122C-1).	ment of Your Current Monthly Income and Calculation of
Be as complete and accurate as possible. If two married people are filing to space is needed, attach a separate sheet to this form, Include the line number additional pages, write your name and case number (if known).	
Part 1: Calculate Your Deductions from Your Income	
The Internal Revenue Service (IRS) issues National and Local Standards the questions in lines 6-15. To find the IRS standards, go online using the information may also be available at the bankruptcy clerk's office.	
Deduct the expense amounts set out in lines 6-15 regardless of your actual e expenses if they are higher than the standards. Do not include any operating 122C-1, and do not deduct any amounts that you subtracted from your spous	expenses that you subtracted from income in lines 5 and 6 of Form
If your expenses differ from month to month, enter the average expense.	
Note: Line numbers 1-4 are not used in this form. These numbers apply to inf	formation required by a similar form used in chapter 7 cases.
5. The number of people used in determining your deductions from in	come
Fill in the number of people who could be claimed as exemptions on you plus the number of any additional dependents whom you support. This r the number of people in your household.	
National Standards You must use the IRS National Standards to a	nswer the questions in lines 6-7.
 Food, clothing, and other items: Using the number of people you enter Standards, fill in the dollar amount for food, clothing, and other items. 	ered in line 5 and the IRS National \$
7. Out-of-pocket health care allowance: Using the number of people you the dollar amount for out-of-pocket health care. The number of people is people who are 65 or olderbecause older people have a higher IRS all higher than this IRS amount, you may deduct the additional amount on I	split into two categoriespeople who are under 65 and owance for health car costs. If your actual expenses are

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Timothy A. Guriel 24-10006 Debtor 1 Case number (if known) People who are under 65 years of age 7a. Out-of-pocket health care allowance per person 7b. Number of people who are under 65 2 7c. Subtotal. Multiply line 7a by line 7b. 158.00 Copy here=> 158.00 People who are 65 years of age or older 7d. Out-of-pocket health care allowance per person 154 7e. Number of people who are 65 or older 0 0.00 7f. Subtotal. Multiply line 7d by line 7e. 0.00 Copy here=> 7g. **Total.** Add line 7c and line 7f 158.00 158.00 Copy total here=> \$ Local Standards You must use the IRS Local Standards to answer the questions in lines 8-15. Based on information from the IRS, the U.S. Trustee Program has divided the IRS Local Standard for housing for bankruptcy purposes into two parts: Housing and utilities - Insurance and operating expenses Housing and utilities - Mortgage or rent expenses To answer the questions in lines 8-9, use the U.S. Trustee Program chart. To find the chart, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office. Housing and utilities - Insurance and operating expenses: Using the number of people you entered in line 5, fill 690.00 in the dollar amount listed for your county for insurance and operating expenses. Housing and utilities - Mortgage or rent expenses: 9a. Using the number of people you entered in line 5, fill in the dollar amount 895.00 listed for your county for mortgage or rent expenses. 9b. Total average monthly payment for all mortgages and other debts secured by your home. To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Next divide by 60. Name of the creditor Average monthly payment -NONE-Сору Repeat this amount 0.00 0.00 9b. Total average monthly payment here=> on line 33a. 9c. Net mortgage or rent expense. Subtract line 9b (total average monthly payment) from line 9a (mortgage Copy 895.00 895.00 or rent expense). If this number is less than \$0, enter \$0. here=> 10. If you claim that the U.S. Trustee Program's division of the IRS Local Standard for housing is incorrect and 0.00 affects the calculation of your monthly expenses, fill in any additional amount you claim.

Explain why:

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24-10006

Case number (if known)

Timothy A. Guriel 11. Local transportation expenses: Check the number of vehicles for which you claim an ownership or operating expense. ☐ 0. Go to line 14. ☐ 1. Go to line 12. 2 or more. Go to line 12. 12. Vehicle operation expense: Using the IRS Local Standards and the number of vehicles for which you claim the 596.00 operating expenses, fill in the Operating Costs that apply for your Census region or metropolitan statistical area. 13. Vehicle ownership or lease expense: Using the IRS Local Standards, calculate the net ownership or lease expense for each vehicle below. You may not claim the expense if you do not make any loan or lease payments on the vehicle. In addition, you may not claim the expense for more than two vehicles. Vehicle 1 **Describe Vehicle 1:** 13a. Ownership or leasing costs using IRS Local Standard..... 0.00 13b. Average monthly payment for all debts secured by Vehicle 1. Do not include costs for leased vehicles. To calculate the average monthly payment here and on line 13e, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60. Average monthly Name of each creditor for Vehicle 1 payment -NONE-Repeat this Copy amount on Total Average Monthly Payment 0.00 0.00 here => Copy net 13c. Net Vehicle 1 ownership or lease expense Vehicle 1 Subtract line 13b from line 13a. if this number is less than \$0, enter \$0. expense here 0.00 0.00 Vehicle 2 Describe Vehicle 2: 13d. Ownership or leasing costs using IRS Local Standard..... 0.00 13e. Average monthly payment for all debts secured by Vehicle 2. Do not include costs for leased vehicles. Name of each creditor for Vehicle 2 Average monthly payment -NONE-Сору Repeat this here amount on line Total average monthly payment 0.00 0.00 13f. Net Vehicle 2 ownership or lease expense Copy net Vehicle 2 Subtract line 13e from line 13d. if this number is less than \$0, enter \$0. expense here 0.00 0.00 14. Public transportation expense: If you claimed 0 vehicles in line 11, using the IRS Local Standards, fill in the 0.00 Public Transportation expense allowance regardless of whether you use public transportation. 15. Additional public transportation expense: If you claimed 1 or more vehicles in line 11 and if you claim that you may also deduct a public transportation expense, you may fill in what you believe is the appropriate expense, but you may 0.00 not claim more than the IRS Local Standard for Public Transportation.

Debtor 1

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Debtor 1 Timothy A. Guriel Case number (if known) 24-10006

	the following IRS categorie		sted above	, you are allowed your monthly expenses	s for			
self-employment taxes, so your pay for these taxes. H and subtract that number f	6. Taxes: The total monthly amount that you will actually pay for federal, state and local taxes, such as income taxes, self-employment taxes, social security taxes, and Medicare taxes. You may include the monthly amount withheld from your pay for these taxes. However, if you expect to receive a tax refund, you must divide the expected refund by 12 and subtract that number from the total monthly amount that is withheld to pay for taxes. Do not include real estate, sales, or use taxes.							
	7. Involuntary deductions: The total monthly payroll deductions that your job requires, such as retirement contributions, union dues, and uniform costs.							
Do not include amounts that	at are not required by your jo	ob, such as v	oluntary 40	11(k) contributions or payroll savings.	\$	0.00		
filing together, include pays Do not include premiums for	Life Insurance: The total monthly premiums that you pay for your own term life insurance. If two married people are filing together, include payments that you make for your spouse's term life insurance. Do not include premiums for life insurance on your dependents, for a non-filing spouse's life insurance, or for any form of life insurance other than term.							
	h as spousal or child suppor	t payments.	·	•	œ.	0.00		
. ,			• • •	You will list these obligations in line 35.	\$	0.00		
20. Education: The total mont		education th	at is either	required:				
as a condition for your j			منامانية		\$	0.00		
	, ,			ation is available for similar services.	Ψ			
	or any elementary or second			sitting, daycare, nursery, and preschool.	\$	0.00		
that is required for the heal by a health savings accour	2. Additional health care expenses, excluding insurance costs: The monthly amount that you pay for health care that is required for the health and welfare of you or your dependents and that is not reimbursed by insurance or paid by a health savings account. Include only the amount that is more than the total entered in line 7. Payments for health insurance or health savings accounts should be listed only in line 25.							
for you and your depender phone service, to the exter income, if it is not reimburs Do not include payments for	23. Optional telephone and telephone services: The total monthly amount that you pay for telecommunication services for you and your dependents, such as pagers, call waiting, caller identification, special long distance, or business cell phone service, to the extent necessary for your health and welfare or that of your dependents or for the production of income, if it is not reimbursed by your employer. Do not include payments for basic home telephone, internet and cell phone service. Do not include self-employment expenses, such as those reported on line 5 of Official Form 122C-1, or any amount you previously deducted.							
24. Add all of the expenses a Add lines 6 through 23.	llowed under the IRS expe	ense allowa	nces.		\$	6,627.25		
		deductions a	llowed by th		\$	6,627.25		
Add lines 6 through 23. Additional Expense Deduction 25. Health insurance, disabil	These are additional and Note: Do not include a lity insurance, and health s	deductions a any expense savings acc	llowed by the allowances			6,627.25		
Add lines 6 through 23. Additional Expense Deduction 25. Health insurance, disabilinsurance, disability insurance	These are additional and Note: Do not include a lity insurance, and health s	deductions a any expense savings acc	llowed by the allowances	s listed in lines 6-24. ses. The monthly expenses for health		6,627.25		
Add lines 6 through 23. Additional Expense Deduction 25. Health insurance, disabilinsurance, disability insurance, your dependents.	These are additional and Note: Do not include a lity insurance, and health s	deductions a any expense savings acc ounts that ar	illowed by the allowances	s listed in lines 6-24. ses. The monthly expenses for health		6,627.25		
Add lines 6 through 23. Additional Expense Deduction 25. Health insurance, disabilinsurance, disability insurance your dependents. Health insurance	These are additional of Note: Do not include a sity insurance, and health since, and health savings acc	deductions a any expense savings accounts that an	llowed by the allowances ount expense reasonab	s listed in lines 6-24. ses. The monthly expenses for health		6,627.25		
Add lines 6 through 23. Additional Expense Deduction 25. Health insurance, disability insurance, disability insurance your dependents. Health insurance Disability insurance	These are additional of Note: Do not include a sity insurance, and health since, and health savings acc	deductions a any expense savings accounts that any \$	ullowed by the allowances ount expense reasonab	s listed in lines 6-24. ses. The monthly expenses for health		0.00		
Add lines 6 through 23. Additional Expense Deduction 25. Health insurance, disability insurance, disability insurance your dependents. Health insurance Disability insurance Health savings account	These are additional Note: Do not include a ity insurance, and health since, and health savings according to tall amount?	deductions a any expense savings accounts that and \$	ollowed by the allowances ount expense reasonabe 0.00 0.00 0.00	s listed in lines 6-24. ISES. The monthly expenses for health ly necessary for yourself, your spouse, o	or			
Add lines 6 through 23. Additional Expense Deduction 25. Health insurance, disabilinsurance, disability insurance your dependents. Health insurance Disability insurance Health savings account Total Do you actually spend this	These are additional Note: Do not include a ity insurance, and health since, and health savings according to tall amount?	deductions a any expense savings accounts that and \$	ollowed by the allowances ount expense reasonabe 0.00 0.	s listed in lines 6-24. ISES. The monthly expenses for health ly necessary for yourself, your spouse, o	or			
Add lines 6 through 23. Additional Expense Deduction 25. Health insurance, disability insurance, disability insurance your dependents. Health insurance Disability insurance Health savings account Total Do you actually spend this No. How much do your yes 26. Continuing contributions continue to pay for the reasyour household or member	These are additional and Note: Do not include a sity insurance, and health since, and health savings according total amount? You actually spend? To the care of household conable and necessary care	deductions a any expense savings accounts that and \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ and support ho is unable	ount expense reasonab 0.00 0.00 0.00 0.00 0.00 cembers. The tof an elder to pay for s	copy total here=> The actual monthly expenses that you will rly, chronically ill, or disabled member of such expenses. These expenses may	or			
Add lines 6 through 23. Additional Expense Deduction 25. Health insurance, disability insurance, disability insurance dependents. Health insurance Disability insurance Health savings account Total Do you actually spend this No. How much do your dependents. Yes 26. Continuing contributions continue to pay for the reasyour household or member include contributions to an 27. Protection against family	These are additional Note: Do not include a sty insurance, and health since, and health savings according total amount? You actually spend? to the care of household conable and necessary care of your immediate family waccount of a qualified ABLE violence. The reasonably residual includes a since and the same account of a qualified ABLE violence.	savings accounts that an \$ \$ or family mand support and support program. 26 the ceessary means and support support and support support and support s	embers. The top any for second of the control of th	copy total here=> The actual monthly expenses that you will rly, chronically ill, or disabled member of such expenses. These expenses may	or \$	0.00		

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btor 1	Timothy A. Guriel	Ca	se number (if kn	own)	24-1	0006			
	Additional home energy costs. Your hom line 8.	e energy costs are included in your insuranc	e and operat	ting	expense	s on			
	If you believe that you have home energy of 8, then fill in the excess amount of home er	osts that are more than the home energy cosnergy costs	sts included i	n ex	penses	on line	е		
	You must give your case trustee document amount claimed is reasonable and necessa	ation of your actual expenses, and you must ary.	show that th	e ad	lditional			\$	0.0
;	Education expenses for dependent child \$189.58* per child) that you pay for your de public elementary or secondary school.	Iren who are younger than 18. The monthly pendent children who are younger than 18 years.	expenses (i	not r tten	more tha	in ite or			
	You must give your case trustee document claimed is reasonable and necessary and r	ation of your actual expenses, and you must not already accounted for in lines 6-23.	explain why	the	amount				
	* Subject to adjustment on 4/01/25, and eve	ery 3 years after that for cases begun on or a	fter the date	of a	djustme	nt.		\$	0.0
		ional allowance, go online using the link spec so be available at the bankruptcy clerk's office		ера	rate				
,	You must show that the additional amount	claimed is reasonable and necessary.						\$	46.0
	Continuing charitable contributions. The instruments to a religious or charitable orga	e amount that you will continue to contribute in a c	n the form of	cas	h or fina	incial			
1	Do not include any amount more than 15%	of your gross monthly income.						\$	0.0
	Add all of the additional expense deduct Add lines 25 through 31.	tions.					9	S	46.00
	ictions for Debt Payment						_		
	or debts that are secured by an interest pans, and other secured debt, fill in lines	in property that you own, including home 33a through 33e.	mortgages,	vel	nicle				
	o calculate the total average monthly paym reditor in the 60 months after you file for ba	ent, add all amounts that are contractually dunkruptcy. Then divide by 60.	ie to each se	ecur	ed				
	Mortgages on your home							verage m syment	onthly
33a.	Copy line 9b here					=>	\$	ymont	0.00
	Loans on your first two vehicles								
33b.	0 " 10"					=>	\$		0.00
33c.						>	\$		0.00
							Ψ.		0.00
33d. Name	List other secured debts: e of each creditor for other secured debt	Identify property that secures the debt		incl	es paym ude taxe nsuranc	es			
					No				
	-NONE-				Yes		\$		
					No				
					Yes		\$		
					No				
					Yes	+	\$		
]	[
	Total average monthly payment. Add lines	233a through 33d	\$		0.00	Copy total here:		\$	0.00

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Timothy A. Guriel Debtor 1 Case number (if known) 24-10006 34. Are any debts that you listed in line 33 secured by your primary residence, a vehicle, or other property necessary for your support or the support of your dependents? No. Go to line 35. ☐ Yes. State any amount that you must pay to a creditor, in addition to the payments listed in line 33, to keep possession of your property (called the cure amount). Next, divide by 60 and fill in the information below. Name of the creditor Identify property that secures the debt Total cure amount Monthly cure amount $\div 60 = \$$ -NONE-\$ Copy total 0.00 0.00 Total here=> 35. Do you owe any priority claims - such as a priority tax, child support, or alimony - that are past due as of the filing date of your bankruptcy case? 11 U.S.C. § 507. No. Go to line 36. The second secon ongoing priority claims, such as those you listed in line 19. Total amount of all past-due priority claims 0.00 ÷ 60 0.00 36. Projected monthly Chapter 13 plan payment Current multiplier for your district as stated on the list issued by the Administrative Office of the United States Courts (for districts in Alabama and North Carolina) or by the Executive Office for United States Trustees (for all other districts). To find a list of district multipliers that includes your district, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. Copy total Average monthly administrative expense here=> 0.00 37. Add all of the deductions for debt payment. Add lines 33e through 36. **Total Deductions from Income** 38. Add all of the allowed deductions. Copy line 24, All of the expenses allowed under IRS 6,627.25 expense allowances Copy line 32, All of the additional expense deductions 46.00 Copy line 37, All of the deductions for debt payment 0.00 6,673.25 6.673.25 Copy total here=> Total deductions.....

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	nothy A. Gu	iriel		Case	numb	er (if known) 2	24-100)06	
t 2: D	etermine You	ur Disposable Income Under 11 U.S.C. § 13	325(b)(2)						
9. Copy y Statem	our total cur	rent monthly income from line 14 of Form Current Monthly Income and Calculation or	122C-1, Chapter 1 f Commitment Per	3 iod.			\$		8,329.8
childre disabilit receive	n. The month by payments for d in accordan	oly necessary income you receive for support payments, for some a dependent child, reported in Part I of Form ce with applicable nonbankruptcy law to the ended for such child.	ster care payments, m 122C-1, that you	or	\$		0.00		
employin 11 U.	er withheld from S.C. § 541(b)	etirement deductions. The monthly total of a come wages as contributions for qualified retirent (7) plus all required repayments of loans from (5) § 362(b)(19).	ment plans, as spec	ified	\$_		0.00		
2. Total of	f all deduction	ons allowed under 11 U.S.C. § 707(b)(2)(A).	Copy line 38 here	=>	\$	6,67	3.25		
expense their ex	es and you ha penses. You	ial circumstances. If special circumstances jave no reasonable alternative, describe the special give your case trustee a detailed explan ocumentation for the expenses.	pecial circumstance	s and					
escribe tl	he special ci	rcumstances	Amount of	expen	se				
			\$						
			\$						
			\$						
		Total	\$	00	Cop	oy e=> \$	-	0.00	
						0.070.05	Сор		6,673.2
1. Total a	djustments.	Add lines 40 through 43.	=>	\$		6,673.25	here	#=> -φ 	0,073.2
5. Calcula	ate your mon	thly disposable income under § 1325(b)(2)			e 39			\$	1,656.56
5. Calcula 3: C 6. Change have ch time yo you file wages i	hange in Ince e in income of anged or are ur case will be dyour petition increased, fill	ome or Expenses or expenses. If the income in Form 122C-1 or virtually certain to change after the date you e open, fill in the information below. For examp, check 122C-1 in the first column, enter line in when the increase occurred, and fill in the second of the column in the seco	r the expenses you filed your bankrupto ple, if the wages re 2 in the second col amount of the incre	reported umn, case.	ted intion increased in the second in the se	n this form and during the reased after ain why the	e	\$	1,656.56
3: Calcula 3: C 6. Change have chime you file	hange in Ince in income of anged or are ur case will be dyour petition	ome or Expenses or expenses. If the income in Form 122C-1 or virtually certain to change after the date you e open, fill in the information below. For examin, check 122C-1 in the first column, enter line	r the expenses you filed your bankruptople, if the wages re 2 in the second col	reported umn, case.	ted in tion I incr expla	n this form and during the reased after	e		1,656.56

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Debtor 1	Timothy A. Guriel	Case number (if known)	24-10006
	-		
Part 4:	Sign Below		
E	By signing here, under penalty of perjury you declare	that the information on this statement and in any att	achments is true and correct.
		,	
Х	/s/ Timothy A. Guriel		
-	Timothy A. Guriel		
	Signature of Debtor 1		
Date	February 20, 2024		
	MM / DD / YYYY		

Debtor 1 Timothy A. Guriel Case number (if known) 24-10006

Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period 07/01/2023 to 12/31/2023.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Wheatland Tube LLC

Income by Month:

6 Months Ago:	07/2023	\$7,413.93
5 Months Ago:	08/2023	\$6,089.41
4 Months Ago:	09/2023	\$6,867.65
3 Months Ago:	10/2023	\$7,187.98
2 Months Ago:	11/2023	\$12,182.85
Last Month:	12/2023	\$10,237.04
	Average per month:	\$8.329.81

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:		:	Liquidation	
	\$2	45	filing fee	
	\$	78	administrative fee	
	+ \$	15	trustee surcharge	
	\$3	38	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$571 administrative fee

\$1,738 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$78	administrative fee
	\$278	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$78	administrative fee
	\$313	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/forms/bankruptcy-forms

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://www.uscourts.gov/services-forms/bankruptcy/cre dit-counseling-and-debtor-education-courses.

In Alabama and North Carolina, go to: http://www.uscourts.gov/services-forms/bankruptcy/cre dit-counseling-and-debtor-education-courses.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 24-10006-JCM Doc 18 Filed 02/20/24 Entered 02/20/24 14:55:58 Desc Main Document Page 46 of 47

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Western District of Pennsylvania

In r	e Timothy A. G	uriel		•	Case No.	24-10006
				Debtor(s)	Chapter	13
	DI	SCL	OSURE OF COMI	PENSATION OF ATTORN	EY FOR DE	BTOR(S)
1.	compensation paid	to me v	within one year before the	2016(b), I certify that I am the attorney f filing of the petition in bankruptcy, or a ion of or in connection with the bankrup	greed to be paid	to me, for services rendered or to
	For legal servi	ces, I h	nave agreed to accept		\$	5,000.00
				ved	\$	2,000.00
	Balance Due				\$	3,000.00
2.	The source of the c	ompens	sation paid to me was:			
	Debtor		Other (specify):			
3.	The source of comp	ensatio	on to be paid to me is:			
	Debtor		Other (specify):			
4.	■ I have not agree	ed to sh	nare the above-disclosed co	ompensation with any other person unle	ess they are memb	pers and associates of my law firm.
				pensation with a person or persons who e names of the people sharing in the con		
5.	In return for the ab	ove-dis	sclosed fee, I have agreed	to render legal service for all aspects of	the bankruptcy c	ase, including:
	b. Preparation andc. Representationd. [Other provisionNegotiat	filing of the of the as as ne	of any petition, schedules, lebtor at the meeting of creeded] vith secured creditors	endering advice to the debtor in determinate statement of affairs and plan which may editors and confirmation hearing, and at to reduce to market value; exempt	y be required; ny adjourned hear stion planning;	rings thereof;
			avoidance of liens on	ations as needed; preparation and household goods.	a filing of moti	ons pursuant to 11 USC
6.	Represe	ntatio		d fee does not include the following ser dischargeability actions, judicial		es, relief from stay actions or
				CERTIFICATION		
this	I certify that the for bankruptcy proceed		is a complete statement o	of any agreement or arrangement for pay	ment to me for re	epresentation of the debtor(s) in
	February 20, 2024	ļ		/s/ Daniel P Foster		
_	Date			Daniel P Foster		
				Signature of Attorney Foster Law Offices		
				1210 Park Avenue		
				Meadville, PA 16335 814-724-1165 Fax: 8	14-724-1158	
				dan@mrdebtbuster.c		
				Name of law firm		

United States Bankruptcy Court Western District of Pennsylvania

In re	Timothy A. Guriel		Case No.	24-10006	
		Debtor(s)	Chapter	13	

VERIFICATION OF CREDITOR MATRIX

VERNITORING OF CREEDITOR VALUE			
The above-named Debtor hereby verifies	nat the attached list of creditors is true and correct to the best of his/her knowledge	ge.	
Date: February 20, 2024	/s/ Timothy A. Guriel		
	Timothy A. Guriel		
	Signature of Debtor		